## CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE SMALL ENTITY OR TOTAL CLAIMS' . RATE FEE RATE FEE FOR NUMBER FILED NUMBER EXTRA BASIC FEI 375.00 BASIC FEE 750.00 OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X42= X84= OR MULTIPLE DEPENDENT CLAIM PRESENT +140= +280= OR \* If the difference in column 1 is less than zero, enter "O" in column 2 TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) (Column 3) CLAUAS ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL RATE TIONAL RATE AFTER PREVIOUSLY EXTRA FEE FEE AMENDMENT PAID FOR 13 20 Total Minus X\$ 9= X\$180 OR Independent 1.0 Minus \*\*\* X84a X42c 129 OR. FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +280= +140= OR pt. OR ADDIT. FEE ADDIT, FEE (Column 1) CLAIMS (Column 3) (Column 2) HIGHES ADDI-ADDI-0 MIMBER REMAINING PRESENT RATE TIONAL RATE TIONAL AMENDMENT PREVIOUSLY AFTER EXTRA PAID FOR FEE ENDMENT FEE Total ' 0 Minus 0 XS 9= X\$18-OR Independent Minus 0 n X42a X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280-OR 6-29-06 TOTAL TOTAL OR ADDIT FEE ADDIT. FEE (Column 1) (Column 2) (Column 3) HIGHEST ပ ADDI-ADDI-REMARKING NUMBER PRESENT AMENDMENT TIONAL AFTER **PREVIOUSLY** RATE RATE TIONAL EXTRA AMENDMENT PAID FOR FEE EEE 20 Total Minus X\$ 9= X\$18= OR Independent .40 X42= X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM. +140= +280= OR If the entry in column 1 is less than the entry in column 2, write "O" in column 3. If the "Highest Rumber Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2." ADDIT. FEE ADDIT. FEE The "Highest Humber Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

FORMPTO-475 (Res.)2021 U.S. Girmann Participate (1997) - 49-47-67151

Application or Dockel Number

1. 1.

## PATENT APPLICATION FEE DETERMINATION RECORD

Application of Docket Number

Effective December 8, 2004								上	10/	6/	13	777
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMA TYP		YITH	OF		ER THAN
TOTAL CLAIMS							R.	ATE	FEE	7	RATE	FEE
FOR			NUM	NUMBER FILED		NUMBER EXTRA		C FEE	1500	OF	BASIC F	€€ 300 O
TOTAL CHARGEABLE CLAIMS			17	7 minus 20=			XS	25=		OF	X\$50	
INDEPENDENT CLAIMS			1	7 minus 3 =		4	X100=		168	<del>,  </del>	Yana	
_	MULTIPLE DEPENDENT CLAIM PE			L_/			7		1 - 0	-1	`	
L				Less than 7000 and of 10° in column 2			1 11			OF	<u> </u>	
•	* If the difference in column 1 is less than zero, enter *0" in column 2							TAL	543	3] OF		<u> </u>
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)						SMA	ALL	ENTITY	OR		R THAN L ENTITY	
AMENDMENT A	1/11/06	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAIO F	ST IER USLY	PRESENT EXTRA	RA	rE	ADDI TIONAI FEE	- 1	RATE	ADDI TIONA FEE
	Total	1. 2	Minus	- 2	-0	:	X\$ 2	5=		OR	X\$50=	
	Independent		Minus	/	0_		X10	)=		OR	X200=	
· ·	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+180	)=	X	OR	+360=	
								TAL	/\	1	TOTA	
		(Column 1)		(Columi	n 21	(Column 3)	ADDIT	EE L		٠, ٢	ADDIT FE	E <b>L</b>
AMENDMENT 8		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	ST R JSLY	PRESENT EXTRA	RAT		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	••		z	X\$ 25	i=		OR	X\$50=	
	Independent	•	Minus	***		=	X100	=		OR	X200=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+180	_		OR	+360=	
								AL.	<u> </u>	OR ,	TOTAL	
		(Column A)		(Column	21	(Column 3)	ADDIT, F	- C			ODN. I CC	
		CLAIMS REMAINING AFTEH AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	T R SLY	PRESENT EXTRA	RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus			-	X\$ 25	-		OR	X\$50=	
	Independent	•	Minus	***		=	X100=	1		OR	X200=	
1	FIRST PRESE	NTATION OF MU	LTIPLE DE	PENDENT CI	AIM		+180=	1		OR	+360=	
lf • • •	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For to THIS SPACE is less than 20, enter "20,"									_ L	TOTAL	

<sup>\*\*\*</sup>If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.